

MERCER COUNTY
HIPAA PROCEDURE:
RESOLUTION OF COMPLAINTS
GENERAL POLICY

It is the policy of Mercer County (the "County") to make available to individuals a mechanism to allow the reporting of any matter relating to an issue of non-compliance with the County HIPAA Privacy Policies and Procedures. The County and its employees and agents, shall not threaten, intimidate or retaliate against any individual filing a complaint. With respect to any such matter, every person within the County has direct access to, and is encouraged to consult, with the County Privacy Officer.

The County shall document all complaints received, and their disposition, if any, and shall maintain this documentation for a period of six years.

PROCEDURE

A. **Employee Reporting**

An employee or agent of the County who acquires information that may give rise to a reasonable belief that another employee or agent is engaged in conduct which violates any provision of the HIPAA Privacy Policies and Procedures, shall promptly report such information to the Privacy Officer. Further, should an agent, representative or other person or firm representing the County in any transaction who acquires information that may give rise to a reasonable belief that another is engaged in conduct which does not meet the standards set forth in the HIPAA Privacy Policies and Procedures, shall promptly report such information to the Privacy Officer.

Reports to the Privacy Officer shall be made in person, by telephone, by voice mail or by mail to the Privacy Officer. Electronic mail (e-mail) may be used, but must be followed by a report in person, by telephone, by voice mail or by mail.

The Privacy Officer shall maintain a "log" of all reports regarding Privacy matters. These reports shall be assigned a sequential file identification number by the Privacy Officer for the specific year and shall be used for new or additional information on the same matter. The caller/author shall not be required to provide his/her name or any other facts that may give away his/her identity. The caller/author shall be encouraged to provide as much information as possible to assist with the investigation of the matter. The caller/author shall also be advised that the Privacy Officer will use best efforts to keep the identity of the caller/author confidential; however, there may be a point in time when the individual's identity may become known or may have to be revealed.

The Privacy Officer shall conduct an investigation of the report, make a record in the log of the results and the specific actions taken after completion of the investigation. The specific facts and circumstances surrounding the report must be kept confidential and any discussions regarding the complaints should be limited to those parties with a “need to know” during the investigation. Upon final resolution of a problem, the Privacy Officer shall provide feedback to the County Executive regarding the possible need for a policy or procedure change. In addition, the Privacy Officer shall prepare periodic reports to be submitted to the County Executive on the status of County compliance with the HIPAA Privacy Policies and Procedures.

In accordance with the County’s Policy, no employee shall suffer any penalty or retribution for the good faith reporting of any suspected instance of wrongdoing, regardless of whether or not such wrongdoing ultimately is determined to exist following investigation.

B. Privacy Investigation and Log.

As indicated above, it is the Privacy Officer’s responsibility to document, adequately investigate (or oversee the investigation of) and appropriately respond to each in-person disclosure, telephone call or voice message, and written correspondence, report form, or e-mail message concerning Privacy matters. The Privacy Officer shall maintain a Privacy log which documents the following items in connection with Privacy matter inquiry:

- Sequential file identification number, date of report of potential non-Privacy or wrongdoing is received, whether the reporter has identified himself or herself, whether the reporter has brought the matter to the attention of his or her immediate supervisor (and if not, why not) and description of the incident;
- Identification of person designated as being primarily responsible for investigating the incident, and identification of any outside counsel or external consultants retained to assist in evaluation and investigation of the incident;
- Current status of the investigation, as periodically updated;
- Date matter is resolved and type of resolution, including corrective action taken, where appropriate, and
- Date matter is reported to the County Executive or reason why not reported.

All information surrounding the complaint and resolution system shall be kept in a secure location for a period of at least six years. Only the Privacy Officer and the County Executive or his designee shall have access to this information.

Should there be any questions or concerns about this policy, or should a request for more information be desirable, please contact the County Privacy Officer at (609) 989-6655. No retaliatory actions may take place with regards to such a request.

HIPAA Complaint Form

Name of Reporting Person (*optional*):

Position Held by Reporting Person (*optional*):

Date of this Complaint: _____

1. Please describe the possible wrongdoing, including the name(s) of the person(s) involved and, if known, the date(s) of the relevant incident(s):

[illegible]

2. Please describe when and how you became aware of this activity:

3. Please describe any evidence that exists to prove the wrongdoing or other means available to verify relevant incident(s):

4. Please list any other person(s) inside or outside of the County who may be able to verify the relevant incident(s):

5. Have you discussed the relevant incident(s) with any other person(s) inside or outside of the County? Yes ____ No _____. If "Yes," please list the identity of such person(s):

6. Would you be willing to discuss the potential wrongdoing with the County's Privacy Officer or legal counsel?
Yes _____ No _____.

Note: Confidentiality is strictly observed except where report disclosure is determined to be required for further action and resolution.

By completing this form, it is understood that as part of Mercer County HIPAA Policies and Procedures, the staff, management or any other employee of Mercer County regardless of status, will not take any retaliatory action against the person who lodges such complaint, or their family members or acquaintances.

Mercer County will mitigate, to the extent practicable, any harmful effects that are known or become known as a result of this complaint.

For a complete record of the duties and responsibilities of Mercer County with regards to HIPAA related complaints, you are encouraged to review the Mercer County HIPAA Privacy Practices and Procedures.